Organized stroke care: A new era in stroke prevention and treatment

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he image of stroke as an event that can be neither prevented nor treated is outdated and inaccurate. Evidence-based medicine has shown that — given the will and the resources — many strokes can be prevented, ¹⁻³ and those that are not can be effectively treated. ^{4,5} The time is right for physicians, in partnership with organizations such as the Heart and Stroke Foundation, to reorganize stroke resources so they are used to maximum efficiency.

The need for physician leadership is urgent. Despite the sophistication of our medical facilities and the best efforts of physicians, with a few exceptions, the current Canadian health care system is at risk of falling behind international standards for stroke care. Neuroprotective agents and thrombolytics are waiting in the wings, but research indicates that even *without* new agents or technologies there are short- and long-term benefits to patients when stroke care is centralized and rationalized. ⁶⁻⁸

As readers of this supplement will discover, stroke presents a considerable human and financial burden to society. Each year, there are approximately 50 000 strokes in Canada; close to 300 000 Canadians are stroke survivors. Stroke is an age-related condition and the number of strokes is projected to increase as the Canadian population ages, unless improvements in prevention and treatment are made. Such an increase will raise the cost of stroke. As documented by Chan and Hayes, in Ontario alone stroke is responsible for direct and indirect costs of almost \$1 billion a year. When all cerebrovascular disease is considered, the annual national total is \$2.7 billion.

A new era in stroke prevention, treatment and recovery is upon us, and changes can be made with cooperation and collaboration among clinicians, policy makers and the health care system at the local, provincial and national levels. In Ontario, for example, physicians have joined with the Heart and Stroke Foundation of Ontario to develop a framework for action on stroke and, together with the Ontario Hospital Association, the Institute for Clinical Evaluative Sciences and the Ministry of Health, to compile an inventory of stroke care resources in all hospitals across the province. At the national level, a Stroke Systems Coalition has been formed by the Heart and Stroke Foundation of Canada, the Canadian Stroke Society and the Health Canada Laboratory Centre for Disease Control. Its mission is to provide leadership in the development of a coordinated national approach to a comprehensive and integrated stroke system in Canada.

"Brain attack" should become as urgent a matter for our health care system as heart attack. The Heart and Stroke Foundation of Ontario hopes that this supplement will help to bring the issue of stroke to the forefront and fuel the process of change.

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Special Supplement

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